

**HUMAN SERVICES DEPARTMENT[441]**

**Adopted and Filed**

**Rule making related to crisis response services**

The Department of Human Services hereby amends Chapter 79, “Other Policies Relating to Providers of Medical and Remedial Care,” Iowa Administrative Code.

*Legal Authority for Rule Making*

This rule making is adopted under the authority provided in Iowa Code section 249A.4.

*State or Federal Law Implemented*

This rule making implements, in whole or in part, Iowa Code section 249A.4.

*Purpose and Summary*

These amendments further amend and clarify standards for crisis response services. Iowa Medicaid currently covers crisis response services; however, these amendments clarify that the daily upper limit for hourly crisis response and hourly crisis stabilization services is limited to the daily per diem for crisis stabilization services. These amendments also make a technical correction to the record requirements in a previously adopted rule.

*Public Comment and Changes to Rule Making*

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on January 31, 2018, as **ARC 3598C**. The Department received no comments during the public comment period. No changes from the Notice have been made.

*Adoption of Rule Making*

This rule making was adopted by the Council on Human Services on March 7, 2018.

*Fiscal Impact*

The fiscal impact cannot be determined. Iowa Medicaid currently reimburses for crisis response services. These amendments are intended to provide the daily upper limit for hourly crisis response and hourly crisis stabilization services to ensure that the cost of hourly services does not exceed the cost of daily crisis stabilization services. There will be new Medicaid expenditures for crisis response services with the clarification of Medicaid participation and reimbursement. However, these services are expected to reduce the utilization of more costly inpatient services. Neither the cost of the crisis services nor the offsetting hospital savings are known with certainty. Therefore, the fiscal impact cannot be determined. Any potential impact will be limited to the availability and capacity of accredited providers. Neither the cost of the subacute services nor the offsetting hospital savings are known with certainty. Therefore, the fiscal impact cannot be determined. Any potential impact will be limited by the availability of beds. There is currently one licensed subacute facility in the state, and only one application has been sent to the department for review. If approved, that facility will provide up to nine subacute beds.

*Jobs Impact*

There is an opportunity for more qualified mental health care professionals and peer support specialists to be employed by these service providers as the crisis response services expand and develop and as subacute mental health care facilities become licensed and enroll with Medicaid.

### *Waivers*

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to rule 441—1.8(17A,217).

### *Review by Administrative Rules Review Committee*

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

### *Effective Date*

This rule making will become effective on May 2, 2018.

The following rule-making actions are adopted:

ITEM 1. Amend subrule **79.1(2)**, provider categories “Crisis response services” and “Crisis stabilization community-based services,” as follows:

<u>Provider category</u>	<u>Basis of reimbursement</u>	<u>Upper limit</u>
Crisis response services	Fee schedule	Fee schedule in effect 2/1/18, <u>not to exceed the daily per diem for crisis stabilization services.</u>
Crisis stabilization community-based services	Fee schedule	Fee schedule in effect 2/1/18, <u>not to exceed the daily per diem for crisis stabilization services.</u>

ITEM 2. Amend subparagraph **79.3(2)“d”(44)** as follows:

~~(44) Crisis response services, crisis stabilization community-based services and crisis stabilization residential services~~ Subacute mental health services.

1. Physician orders or court orders.
2. Independent assessment.
3. Individual treatment plan.
4. Service notes or narratives (history and physical, therapy records, discharge summary).
5. Medication administration records (residential services).

ITEM 3. Amend subparagraph **79.3(2)“d”(45)** as follows:

~~(45) Subacute mental health services~~ Crisis response services, crisis stabilization community-based services and crisis stabilization residential services.

1. Assessment.
2. Individual stabilization plan.
3. Service notes or narratives (history and physical, therapy records, discharge summary).
4. Medication administration records (residential services).

[Filed 3/7/18, effective 5/2/18]

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EDITOR’S NOTE: For replacement pages for IAC, see IAC Supplement 3/28/18.